

Dr. Jeff Gardere Testimony in Support of SB1076

Good day Chairs and Members of the Public Health committee

I am a board certified clinical psychologist, an ordained minister, and a professor at a New York medical school.

I understand the concerns of the opposition, who equate terminally ill adults who want the end-of-life care option of medical aid in dying with people who unfortunately take their life prematurely. But scientifically and factually it is incorrect to equate terminally ill adults who want the end-of-life care option of medical aid in dying with people who unfortunately take their life prematurely.

And according to the American Psychological Association, they are fundamentally different.. As well, The American Association of Suicidology also argues, medically and legally, Physician Aid in Dying and suicide are conceptually different phenomena.

But I would like to discuss something that perhaps we may not have touched upon with other speakers.. I teach about life long health care disparities that we are all aware of... but we don't talk enough about end of life healthcare disparities. For example vs whites:

- African Americans are far less likely to have completed an advance directive
- They are more likely to have their pain underestimated and under treated
- Less likely to receive opioid analgesics
- Less likely to use palliative and hospice care
- More likely to die in ICU's

My concern is that by silencing or denying the need for MAID as an end of life treatment option for all people who qualify and are in need of it, we will create a stigma concerning conversations about death and dying and that stigma will be even greater in the Black and Brown community that has a greater stigma to discussing mental illness but just as importantly death and dying. . But just as seriously, cutting off conversations or equating suicide to MAID, will not only exacerbate the end of life disparities they already experience, but they, black and brown people will be made to suffer even more needlessly as part of a medical system where they are already suffering needlessly.

MAID must be made available for the people of Connecticut now. There will always be too many terminally ill, dying people in Connecticut who are and will be unnecessarily suffering at the end of life and many of those are people of color who are already victims of substandard care and health disparities from the beginning to the end of life. . And the reality is there are too many terminally ill adults from every race, religion, gender and attractiveness, who passed away advocating for passage of this law. We owe it to all of them to provide an end-of-life care option that offers peace and comfort. The time to pass this bill is now!